

PREVAILED

Roll Call No. _____

FAILED

Ayes _____

WITHDRAWN

Noes _____

RULED OUT OF ORDER

HOUSE MOTION _____

MR. SPEAKER:

I move that Engrossed Senate Bill 66 be amended to read as follows:

- 1 Page 3, between lines 10 and 11, begin a new paragraph and insert:
- 2 "SECTION 3. IC 12-15-12-6 IS AMENDED TO READ AS
- 3 FOLLOWS [EFFECTIVE JULY 1, 2005]: Sec. 6. (a) A Medicaid
- 4 recipient may be admitted to a hospital by a physician other than the
- 5 recipient's managed care provider if the recipient requires immediate
- 6 medical treatment.
- 7 (b) The admitting physician shall notify the recipient's managed care
- 8 provider of the recipient's admission not more than forty-eight (48)
- 9 hours after the recipient's admission.
- 10 (c) Payment for services provided a recipient admitted to a hospital
- 11 under this section shall be made only for services that the office or the
- 12 contractor under IC 12-15-30 determines were medically reasonable
- 13 and necessary.
- 14 **(d) A physician who provides physician services in the**
- 15 **emergency department of a hospital licensed under IC 16-21 to a**
- 16 **recipient of a managed care organization shall notify the managed**
- 17 **care organization not later than five (5) business days after the**
- 18 **physician provided a service to the recipient. The managed care**
- 19 **organization may specify the procedure in which the physician**
- 20 **must notify the managed care organization, including that the**
- 21 **notice may be in written or electronic format.**
- 22 SECTION 4. IC 12-15-12-18.5 IS ADDED TO THE INDIANA
- 23 CODE AS A NEW SECTION TO READ AS FOLLOWS
- 24 [EFFECTIVE JULY 1, 2005]: Sec. 18.5. (a) Subject to federal law,
- 25 a managed care organization may establish policies to control the

1 utilization of services by a recipient.

2 (b) Before a managed care organization may implement a policy
3 under subsection (a), the managed care organization shall notify
4 each Medicaid recipient at least thirty (30) days before
5 implementing the policy.

6 (c) A recipient may appeal under IC 4-21.5 the implementation
7 of a policy under subsection (a).".

8 Page 3, line 12, delete "Payment" and insert "Except as provided
9 in subsection (e), payment".

10 Page 3, line 19, after "(c)" insert "This subsection applies to
11 reimbursement provided under the Medicaid program, including
12 reimbursement by a Medicaid risk based managed care
13 organization.".

14 Page 3, line 27, delete "Payment" and insert "Except as provided
15 in subsection (e), payment".

16 Page 3, between lines 34 and 35, begin a new paragraph and insert:

17 "(e) A physician who:

18 (1) provides services described in subsection (a); and

19 (2) does not have a contract with a managed care
20 organization;

21 may agree to provide the services described in subsection (a) or
22 subsection (c) for a rate other than one hundred percent (100%) of
23 the rate payable under the Medicaid fee structure.".

24 Renumber all SECTIONS consecutively.

(Reference is to ESB 66 as printed March 25, 2005.)

Representative Brown T